



# Texas Board of Occupational Therapy Examiners

333 Guadalupe, Ste 2-510  
Austin, Texas 78701-3942

512/305-6900 • 512/305-6951 fax  
<http://www.ptot.texas.gov>

## OT/OTA RETIRED STATUS APPLICATION & RENEWAL FORM

License #: \_\_\_\_\_

Daytime Phone #: \_\_\_\_\_

Name: \_\_\_\_\_

RESIDENTIAL ADDRESS: Below is space for your mailing address. Attach your physical address, if different.

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Please note:

- The Retired Status is available for an occupational therapy practitioner whose only practice is the provision of voluntary charity care without monetary compensation.
- Licensees on retired status are subject to the audit of continuing education as described in §367.3 of the OT Rules (relating to Continuing Education Audit).
- A retired occupational therapy practitioner is subject to disciplinary action under the OT Practice Act.

### Please check the box that applies:

☐ **Initiating the Retired Status:**

To be eligible for retired status, a licensee must hold a current license on active or inactive status.

Requirements for initial retired status are:

- (1) a completed retired status application form;
- (2) a passing score on the online jurisprudence exam;
- (3) the completed continuing education for the current renewal period (please complete the attached form); and
- (4) the retired status fee and any late fees which may be due.

☐ **Renewing the Retired Status:**

Requirements for renewal of retired status. A licensee on retired status must renew every two years before the expiration date. The retired occupational therapy practitioner shall submit:

- (1) the retired status renewal form;
- (2) a passing score on the online jurisprudence exam;
- (3) the retired renewal fee and any late fee which may be due; and
- (4) completion of 6 hours of Type 2 continuing education each license renewal period, as described in §367.1 of this title (relating to Continuing Education). (Please complete the attached form.)

A licensee on retired status may use the designation OTR, Ret or OT, Ret; or COTA, Ret or OTA, Ret as appropriate.

### Read §371.2, Retired Status, before you sign and submit this form.

By signing this form, I attest that I have met all the requirements as stated in the current OT rules and attest the following:

1. Since license issuance or last renewal, I have not been convicted of a felony, including a finding or verdict of guilt, an admission of guilt, or a plea of nolo contendere, in this state or any other.
2. Since license issuance or last renewal, I have not had my license or registration to practice occupational therapy suspended or revoked in any other state or nation.

I understand that providing false or incorrect information is a violation of the OT Practice Act, and may subject me to the penalties set forth in the Act.

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
(Date)

For office use only.

Fees Received: \_\_\_\_\_ Receipt Date: \_\_\_\_\_ Receipt No.: \_\_\_\_\_

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**Name:** \_\_\_\_\_ **License #:** \_\_\_\_\_

## Continuing Education Submission Form for RENEWING a License on Retired Status

***(Only use this CE Submission form when RENEWING a license on Retired Status.  
DO NOT use this form if initiating Retired Status.)***

Enter your CE activities taken during this renewal period. You are required to have at least 6 Type 2 hours. Please read OT Rules Chapter 367, Continuing Education, and §371.2, Retired Status, for more information.

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Name: \_\_\_\_\_ License #: \_\_\_\_\_

## Continuing Education Submission Form for INITIAL RETIRED STATUS

***(Only use this CE Submission form when INITIATING Retired Status.  
DO NOT use this form if renewing a license on Retired Status).***

Enter your CE activities taken during this renewal period. You are required to have at least 15 Type 2 hours and 30 hours total to meet the renewal requirements for the current renewal period. Please read OT Rules Chapter 367, Continuing Education, and §371.2, Retired Status for more information.

Course/Activity Name	Course Date (MM/DD/YYYY)	Type 1 (Enter # of hours of each type.)	Type 2